

# COUNTY OF LOS ANGELES TREASURER AND TAX COLLECTOR

KENNETH HAHN HALL OF ADMINISTRATION 500 WEST TEMPLE STREET, ROOM 437 LOS ANGELES, CALIFORNIA 90012



MARK J. SALADINO TREASURER AND TAX COLLECTOR

August 26, 2004

TELEPHONE (213) 974-2101 TELECOPIER (213) 626-1812

The Honorable Board of Supervisors County of Los Angeles 383 Kenneth Hahn Hall of Administration 500 West Temple Street Los Angeles, CA 90012

Dear Supervisors:

# REQUEST TO ACCEPT COMPROMISE OFFER OF SETTLEMENT (ALL DISTRICTS AFFECTED – 3 VOTES)

### IT IS RECOMMENDED THAT YOUR BOARD:

Pursuant to Section 1473 of the Health and Safety Code, authorize acceptance of the compromise offers of settlement from the following individuals who were injured in a third party compensatory accident and who received medical care at a County facility:

Account Number 10441209, in amount of \$153,195 Account Number 10502610, in amount of \$21,805

#### JUSTIFICATION:

The best interest of the County would be served by the approval of this recommendation and the County Counsel concurs.

The Honorable Board of Supervisors August 26, 2004 Page 2

# PURPOSE OF RECOMMENDED ACTION:

The compromise offers of settlement are recommended because the patients, estates, or legally responsible relatives are unable to pay the charges.

# **IMPLEMENTATION OF STRATEGIC PLAN GOALS:**

This action is consistent with the Countywide Strategic Plan Goal of Fiscal Responsibility in pursuing collection of charges owed for County services.

## FISCAL IMPACT:

The County will recover partial payment from a third party against debts, otherwise uncollectible due to the limited financial resources of the individuals who received the medical care.

Respectfully submitted,

MARK J. SALADINO

Treasurer and Tax Collector

MJS:SFJ:efh

Attachments

 c: Chief Administrative Officer County Counsel

APPROVED AS TO FORM

OFFICE OF THE COUNTY COUNSEL

Principal Deputy County Counsel

#### DATA FOR COMPROMISE SETTLEMENT

# COUNTY OF LOS ANGELES TREASURER AND TAX COLLECTOR

TRANSMITTAL NO. 66A DATE: August 26, 2004

		Account	
Amount of Aid	\$515,219.00	Number	10441209
Amount Paid	.00	Client	Adult Female
		Service	
Balance Due	515,219.00	Date	08/28/99 to 01/12/00
Compromise			
Amount Offered	153,195.00	Facility	LAC USC Medical Center
Amount to be		Service	
Written Off	\$362,024.00	Type	Inpatient/Outpatient

#### JUSTIFICATION

The client was involved in an automobile versus pedestrian accident. She was treated at LAC USC Medical Center at a cost of \$515,219.00. There was no Medi-Cal or Medicare involvement associated with the County related charges.

The attorney has settled the case for the amount of \$1,351,861.50 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$ 675,930.75	\$ 675,930.75	50.00%
Attorney Cost	39,500.00	39,500.00	2.92%
Medi-Cal	42,000.00	42,000.00	3.10%
Medicare	1,260.00	1,260.00	.10%
County of Los Angeles	515,219.00	153,195.00	11.33%
Net to Client	N/A	439,975.75	32.55%
Total	\$1,273,909.75	\$1,351,861.50	100.00%

Our financial investigation reveals that the client is 74 years old. The only source of income is Social Security. She has no other source of income or tangible assets.

## DATA FOR COMPROMISE SETTLEMENT

COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR

TRANSMITTAL NO. 66B DATE: August 26, 2004

		Account	
Amount of Aid	\$73,393.00	Number	10502610
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Amount Paid	.00	Client	Adult Female
		Service	
Balance Due	73,393.00	Date	12/07/99 to 12/30/99
Compromise			h.
Amount Offered	21,805.00	Facility	Rancho Los Amigos Medical Center
Amount to be		Service	
Written Off	\$51,588.00	Туре	Inpatient/Outpatient

#### **JUSTIFICATION**

The client was involved in an automobile versus pedestrian accident. She was treated at Rancho Los Amigos Medical Center at a cost of \$73,393.00. There was no Medi-Cal or Medicare involvement associated with the County related charges.

The attorney has settled the case for the amount of \$148,138.50 and proposes the following disbursement:

Disbursements	Total Claim	Proposed Settlement	Percent of Settlement
Attorney Fees	\$ 74,069.25	\$ 74,069.25	50.00%
Attorney Cost	10,500.00	10,500.00	7.09%
Medi-Cal	18,000.00	18,000.00	12.16%
Medicare	540.00	540.00	.37%
County of Los Angeles	73,393.00	21,805.00	14.71%
Net to Client	N/A	23,224.25	15.67%
Total	\$176,502.25	\$148,138.50	100.00%

Our financial investigation reveals that the client is 74 years old. The only source of income is Social Security. She has no other source of income or tangible assets.